

Return of Organization Exempt From Income Tax

OMB No 1545-0047 2017

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

ection 501(c), 527, or 494/(a)(1) or the internal list of the latest information.

▶ Do not enter social security numbers on this form as it may be made public. 1908 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

<u>A</u>	For the	2017 cale	endar year, or tax year beginning 9.1 , 2017, and endin	g 8	31	, 20 18
В	Check if	applicable	C Name of organization Canadian County Farm Bureau		D Employe	er identification number
	Address	change	Doing business as			73-0628951
$\overline{\Box}$	Name ch	•	Number and street (or P O box if mail is not delivered to street address) Room/sui	te	E Telephon	ie number
$\overline{\mathbf{Z}}$	Initial ret	•	P.O. Box 1148			405-262-1295
$\vec{\Box}$		m/terminated				
H	Amende				G Gross re	ceipts \$ 322,352 72
Η			El Reno, Ok 73036 F Name and address of principal officer David VonTungeln	11/-> 1- 45		subordinates? Yes No
ш	Applicati	ion penaing	_	I		
_			120 S Heaston Rd., Calumet OK 73014			included? Yes No list (see instructions)
Ļ		mpt status	□ 501(c)(3)	-4		
<u>''</u>	Website		G - G - G - A - T		exemption i	
K			✓ Corporation Trust Association Other ► L Year of format	on 1942	M State	of legal domicile OK
Ľ	art I	Summ				
	1	Briefly de	escribe the organization's mission or most significant activities: Agricul	tural Membe	rship Org	anızation
če	1					
Activities & Governance						
/eri	2	Check th	his box $ ightharpoonup$ if the organization discontinued its operations or disposed of	of more than	25% of 1	ts net assets
Ó	3	Number	of voting members of the governing body (Part VI, line 1a) .		3	9
ď			of independent voting members of the governing body (Part Vi) line 14		4	9
ies			mber of individuals employed in calendar year 2017 (Falt), line 2a)		5	0
Ξ	ء ا	Total acce	mbox of voluntaers (estimate if accessor)	,/	6	
Act	7a	Total unr	related business revenue from Part VIII column (of line 12, 2019)	<u> </u>	7a	251,119 29
_	b	Net unre	lated business taxable income from Form 990-T. line 34 %		7b	11,580 87
_		TTOC GINE	related business revenue from Part VIII, column (2), line 12, lated business taxable income from Form 990-T, line 34	Prior Ye		Current Year
			tions and grants (Part VIII, line 1h) service revenue (Part VIII, line 2g)	<u></u>		
<u>r</u> e			convenience (Part VIII, line 11)		14,538 50	43,778 50
Ven			service revenue (Part VIII, line 2g)			
Revenue					87	5 41
_			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 16c, and 11e)		14,344 26	262,768 23
_	1		enue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21	38,883 63	306,552 14
		Grants a	nd similar amounts paid (Part IX, column (A), lines 1-3)			
	14	Benefits	paid to or for members (Part IX, column (A), line 4)		4,942.93	10,883.96
S	15	Salaries,	other compensation, employee benefits (Part IX, column (A), lines 5-10)	2	29,863 00	203,132 47
Expenses	16a	Profession	onal fundraising fees (Part IX, column (A), line 11e)			
g.	b	Total fun	draising expenses (Part IX, column (D), line 25) ▶			
ũ	17	Other ex	penses (Part IX, column (A), lines 11a-11d, 11f-24e)	1	14,988 39	97,364 42
	1		penses. Add lines 13-17 (must equal Part IX, column (A), line 25)		19,794 32	311,380 85
			less expenses Subtract line 18 from line 12		0.910 69)	(4,828.71)
≥ Si				Beginning of Cu		End of Year
ssets or Balances	20	Total ass	ets (Part X, line 16)		92 634.56	364,298 06
Ass	21		pilities (Part X, line 26)		70,888.19	
Net As Fund B	22		ts or fund balances Subtract line 21 from line 20			47,380 40
$\overline{}$	art II		ture Block		21,746.37	316,917 66
			ry, I declare that I have examined this return, including accompanying schedules and stater lete. Declaration of preparer (other than officer) is based on all information of which preparer			ly knowledge and belief, it is
		1	The second secon	1.00 0.17 10.1011		
ei.		*	And the first			
Sig		! ***	ature of officer	Da	te	
He	re	ملير ا	avid VonTungan President			
	<u>.</u>	<u> </u>	e or print name and title			
Pa	id		pe preparer's name Preparer's signature Da		Check	T If PTIN
	epare	r She	Mey Branitt Shalley Dranith 1	1/20/18	self-empl	
	e Only		ame Oklahoma Farm Bureau		's EIN ▶	73-0382001
			ddress ► 2501 N Stiles, Okla City Ok 73105		ne no	405-523-2300
Ma	y the IR		s this return with the preparer shown above? (see instructions)			. 🗸 Yes 🗌 No

Form **990** (2017)

Part		Statement of Program Service		Part III	[2]
1		describe the organization's miss		raitiii	· · <u>V</u>
'	_	_			
2	prior l	Form 990 or 990-EZ?		year which were not listed on the Yes	✓ No
		s," describe these new services o			
3	servic	es [?]		how it conducts, any program	☑ No
		s," describe these changes on Sc			
4	exper	ses. Section 501(c)(3) and 501(c		ts three largest program services, as mea ort the amount of grants and allocations to	
4a) (Revenue \$	
	•				
4b) (Revenue \$	
					
		·····			
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		•••••••			
					••••
		·			
Δd	Other	program services (Describe in Sc	hedule ()		
Tu		nses \$ Including		e \$ \	
4e		program service expenses) (Nevenu	T. T	



Part	IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		✓
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		✓
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		1
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.	5	✓	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		√
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		\
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9		*
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, IX, or X as applicable.			
а	D 1 11 D 1 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 1 D 1 D 1 1 D	11a	1	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		✓
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		√
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		√
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	·	1
			~~~	

Part	Checklist of Required Schedules (continued)			
			Yes	No
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		✓
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	-	1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		<b>√</b>
c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		<b>√</b>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d		1
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		1
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III </i>	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions).			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		<b>√</b>
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		<b>√</b>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		7
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>▼</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		<b>√</b>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<b>√</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	-	<b>▼</b>
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		1
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		✓
37	related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
· ·	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38		<b>√</b>

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	,	į	,
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	-	!	
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
٥	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
L	Statements, filed for the calendar year ending with or within the year covered by this return  2a	2b		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	20	-	
За	<b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	<b>∀</b>	_
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority	30	_	-
70	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		1
b	If "Yes," enter the name of the foreign country. ▶	<del></del>	-	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			,
	(FBAR)			ļ. ,
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		1
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		<b>/</b>
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<u>:</u>
	and services provided to the payor?	7a		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _		١,
	required to file Form 8282?	7c		<b>✓</b>
d	If "Yes," indicate the number of Forms 8282 filed during the year	<b>├</b> —		<del></del>
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>✓</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		<b>✓</b>
g h	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		<b>∀</b>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	<del>  '''</del>		1.
	sponsoring organization have excess business holdings at any time during the year?	8		<del></del>
9	Sponsoring organizations maintaining donor advised funds.	۳	4	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter.			4.
а	Initiation fees and capital contributions included on Part VIII, line 12			, "
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b	] `•	, .	- :
11	Section 501(c)(12) organizations. Enter:	]•		١,
а	Gross income from members or shareholders	]	•	
b	Gross income from other sources (Do not net amounts due or paid to other sources	~	,	
	against amounts due or received from them)	<u> </u>		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	4		• ;
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		ļ .
<b>k</b>	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O.			۱, ۳
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		. :	
С	_	'		
14a	Enter the amount of reserves on hand	14-		ļ
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an evolunation in Schedule O	14a		

	0 (2017)	<del></del>		Page C
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule Check if Schedule O contains a response or note to any line in this Part VI		struct	ioris.
Sooti	on A. Governing Body and Management	<u> </u>	<u> </u>	
36011	on A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year   1a	٩	•	
••	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			,
b	Enter the number of voting members included in line 1a, above, who are independent 1b	9.	~	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship w	th		
	any other officer, director, trustee, or key employee?	2	<b>↓</b>	✓
3	Did the organization delegate control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the direction of the control over management duties customarily performed by or under the control over management duties customarily performed by or under the control over management duties and the control over management duties customarily performed by or under the control over management duties and the control over management duties are control over management duties.			١,
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3	<b>├</b>	<b>✓</b>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	5	+	1
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	6	1	<b>-</b>
7a	Did the organization have members of stockholders, or other persons who had the power to elect or appo		+	╁
-	one or more members of the governing body?	7a	1	1
b	Are any governance decisions of the organization reserved to (or subject to approval by) membe	<u> </u>		<u> </u>
	stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	ng 📗		. •
	the year by the following	<u> </u>		<u>'</u>
а	The governing body?	8a	<b>√</b>	
р	Each committee with authority to act on behalf of the governing body?	8b	<b>/</b>	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	al   9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Re		ode '	
00011	on bit ondes (This decisor b requeste information about policies for required by the internal rice	701140 0	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapter	s,		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	ļ	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form	⁷ 11a	✓	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			ئبدا
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	+	<b>✓</b>
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflict		₩	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes describe in Schedule O how this was done	5,″   12c		ŀ
13	Did the organization have a written whistleblower policy?	13	$\vdash$	1
14	Did the organization have a written document retention and destruction policy?	14	+	1
15	Did the process for determining compensation of the following persons include a review and approval			Ť.
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		!	ڊ <u>ا</u>
а	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		ļ
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			-1-
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangements a tayable activides the vess?		·	
	with a taxable entity during the year?	16a	<del></del>	✓
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard ti			. •
	organization's exempt status with respect to such arrangements?	16b	┝	
Secti	on C. Disclosure		<u></u>	
17	List the states with which a copy of this Form 990 is required to be filed ▶ Oklahoma			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Sec	tion 501	(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict or	interest	policy	y, and
20	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and	records .		

Part VII	Compensation of Officers, Directors,	Trustees,	Key Employees,	Highest	Compensated	<b>Employees</b>	, and
	Independent Contractors						

Check if Schedule O contains a res	ponse or note to any	line in this Part VII							]
	<del></del>					_	 	 	_

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order individual trustees or directors, institutional trustees, officers; key employees; highest compensated employees, and former such persons.

☐ Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ated any currer	nt officer, director	r, or trustee.	
(A) Name and Title	(B) Average hours per week (list any	box,	unles er and	Pos neck ss pe	rson	e than o	an tee)	(D)  Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other	_
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations	
(1) David VonTungeln - President	4	<b>✓</b>		1				0	0		<u>0</u>
(2) Henry Heinrich - Vice President	1.5	1		1					0		_
(3) Francis Parizek - Secretary/Treasury	1.5	<b>▼</b>		_\/			-	0			<u>0</u> 0
(4) Stanley Burris - Director	1	1						0			0
(5) Ken Carpenter - Director	1	>						o	0		0
(6) Clint Reuter - Director	1	<b>√</b>						o	0		_ 0
(7) Steve Bomhoff - Director	1	<b>√</b>						o	0		0
(8) Peter Jefferey - Director	<u>-</u>	1						0	o		0
(9) Gary Tech - Director	1	<b>*</b>						0			0
(10)											_
(11)											_
(12)											_
(13)											_
(14)											_

Par	VII Section A. Officers, Directors, Trust	ees, Key E	mploy	/ees	s, ar	nd H	lighe	st C	ompensated E	mployees (d	continu	ıed)	
	(A) Name and title	(B) Average hours per week (list any	box, ι	unles	Pos eck s pe	rson	e than o is both or/trust	an tee)	(D)  Reportable compensation from	(E) Reportabl compensation related		Estin	F) nated unt of ner
		hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizatio W-2/1099-M		compe from	nsation i the ization elated
(15)													
(16)													
(17)													
(18)													_
(19)										·			
(20)													
(21)													
(22)													
(23)													
(24)													
(25)													<del> </del>
1b c	Sub-total  Total from continuation sheets to Part  Total (add lines 1b and 1c)					·		<u> </u>					
2	Total number of individuals (including but reportable compensation from the organi	not limited				ed a	above	e) w	ho received m	ore than \$10	00,000	) of	
3	Did the organization list any former of employee on line 1a? If "Yes," complete 5							emp	oloyee, or high	est comper	nsated		Yes No
4	For any individual listed on line 1a, is the organization and related organizations individual		an \$1	50,	000	2 11	f "Ye	s, "					
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or ind	ıvıdua	5	
Section	on B. Independent Contractors		<del></del>						•				
1	Complete this table for your five highest of compensation from the organization. Replyear												n's tax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compensa	tion
			•										
2	Total number of independent contractor							th	ose listed abo	ove) who	1, 1	ر اوس د که	검

Par	t VIII				luna un Alaia	D at 3 ////		
		Check if Schedule C	) contains a res	sponse or note to	(A) Total revenue	(B)  Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ts at	1a	Federated campaigns	s 1a					
Contributions, Grfts, Grants and Other Similar Amounts	b	Membership dues .	1b	43,778.50	į.			
ě, Š	С	Fundraising events .	1c					
ar / a	d	Related organizations	<del></del>					
s, G	е	Government grants (cor						
io S	f	All other contributions, g	lifts, grants,		-			
the the		and similar amounts not inc	cluded above 1f					
E G	g	Noncash contributions include	ded in lines 1a-1f. \$					
SE	h	Total. Add lines 1a-1	f		43,778.50			
				Business Code			_	
ven	2a							
æ	b							
Ş	С							
Ser	d							
E	e							
Program Service Revenue	f	All other program ser						
<u>~</u>	g	Total. Add lines 2a-2	<u>.</u>	▶				
	3	Investment income						
		and other similar amo	· ·	<u> </u>	5.41			5 41
	4	Income from investmen	it of tax-exempt b	ond proceeds ►				<u>.</u>
	5	Royalties						
			(i) Real	(II) Personal				
	6a	Gross rents	30,370 00	+	1	İ		
	b	Less. rental expenses	15,800 58	† <u> </u>				
	C	Rental income or (loss)	14,569 42	·				
	d 7a	Net rental income or gross amount from sales of	(IOSS)	. ► I	14,569.42	11,648.94	2,920.48	
	/a	assets other than inventory	(i) decurries	(ii) Other				
	ь	Less. cost or other basis						
		and sales expenses						
	С	Gain or (loss) .	<u> </u>	<del>                                     </del>			İ	
	d	Net gain or (loss) .	ŧ	<del>' ▶</del>		<del></del>	<del></del> !	
	"	rver gain or (1033) .						<del></del>
venue	8a	Gross income from fuevents (not including \$	undraising					j
Other Reve		of contributions reported See Part IV, line 18 .	ed on line 1c)					
Ę.	b	Less. direct expenses	s. <b>b</b>	)				
		Net income or (loss) f		events . >				
	9a	Gross income from ga	aming activities.					
		See Part IV, line 19 .	···a					ļ
		Less: direct expenses		t. L				
		Net income or (loss) f		ıvıtıes ▶				
	10a	Gross sales of in				ļ		
		returns and allowance				İ		
	b	Less: cost of goods s						<del></del>
	С	Net income or (loss) f						
		Miscellaneous R		Business Code				
		Office Commissions		524113	13,310 70		13,310.70	
		Office Commissions		524126	191,250 08		191,250 08	
	C .	Salary Reimbursement		524126	43,638 03		43,638 03	
	d	All other revenue		L				
		Total. Add lines 11a-		-	248,198 81			
	12	Total revenue. See in	istructions	<b>▶</b> 1	306 552 14	55 427 44	251 119 29	5 /11

Part IX	Statement of Functional Expenses
1 41 5 1/5	Otatoricit of Fariotional Expenses

Sectio	on 501(c)(3) and 501(c)(4) organizations must cor	nplete all columns A	All other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	ise or note to any lii	ne in this Part IX		
	ot include amounts reported on lines 6b, 7b, o, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				, <u>,                                   </u>
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16.				
<b>4</b> <b>5</b>	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	10,883 96		. 1	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 8	Other salaries and wages	188,543 14			
9	Other employee benefits	25 00			
10	Payroll taxes	14,564.33			
11	Fees for services (non-employees):				
a	Management				
b	Legal	420.00			
d	Lobbying	420 00			
e	Professional fundraising services See Part IV, line 17		4		
f	Investment management fees		•		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12	Advertising and promotion	1,795.04			
13	Office expenses	5,251 40			
14	Information technology				
15	Royalties				
16	Occupancy	56,798.07			
17 18	Travel				
19	Conferences, conventions, and meetings				
20	Interest	857.89		-	
21	Payments to affiliates	037.03			
22	Depreciation, depletion, and amortization .	15,973.13			
23	Insurance	11,123.75			
24	Other expenses Itemize expenses not covered	1/3			* *
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column		•		
	(A) amount, list line 24e expenses on Schedule O)		<i>, :</i>	4	
а	Pent Evnense	5,400.00	m saras y	· 1 · 1 · 1 · 1 · 1	* ' 1
b	Postage	(254.86)			
С		(=560)	<del></del>		
d					
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	311,380.85	·		
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

РΡ	art X	Balance Sheet	<u> </u>		
		Check if Schedule O contains a response or note to any line in this Pa	rt X		<u></u>
			(A) Beginning of year		<b>(B)</b> End of year
	1	Cash—non-interest-bearing	4,466.95	1	4,472.36
	2	Savings and temporary cash investments	52,665 07	2	43,870 83
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	80.00	4	80.00
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees	<u> </u>		
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			· · · · · ·
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and	<i>,</i> ·		
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary	<u> </u>		
ফ		organizations (see instructions) Complete Part II of Schedule L		6	
Assets	7	Notes and loans receivable, net		7	
Ą	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or	,	,	,
		other basis Complete Part VI of Schedule D 10a 821,095 48			
	b	Less. accumulated depreciation . 10b 505,220 61	335,422.54	10c	315,874.87
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)	392,634 56	16	364,298.06
	17	Accounts payable and accrued expenses	8,457 00	17	14,638 50
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22 ·	Loans and other payables to current and former officers, directors,	,	•	· .
Ħ		trustees, key employees, highest compensated employees, and	5 A 1		1 '
Liabilities		disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	62,431.19	24	32,741 90
	25	Other liabilities (including federal income tax, payables to related third		1	
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	70,888 19	26	47,380.40
es		Organizations that follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 27 through 29, and lines 33 and 34.	•	,	" ">"
S.	27	Unrestricted net assets		27	<del></del>
ă ă	28	Temporarily restricted net assets		28	
d E	29	Permanently restricted net assets		29	
ڃ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and		,	
or Fund Balances		complete lines 30 through 34.		ŧ	
S	30	Capital stock or trust principal, or current funds		30	
sel	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets	32	Retained earnings, endowment, accumulated income, or other funds .	321,746 37		316,917.66
É	33	Total net assets or fund balances	321,746 37		316,917.66
_	34	Total liabilities and net assets/fund balances	392,634.56		364,298 06

_	4	•
Page	-1	-

,0,,,,,					9
Pari	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		306,5	52.14
2	Total expenses (must equal Part IX, column (A), line 25)	2		311,3	80.85
3	Revenue less expenses Subtract line 2 from line 1	3		(4,8	28 71)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		321,7	46.37
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		316,9	17.66
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII	<u>. , .                                  </u>			
				Yes	No
1	Accounting method used to prepare the Form 990		F Carry	,``~	اد اد اد ام
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in	" ئ	* ,	*
	Schedule O			· -	
2a			2a		<b>✓</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or			1
	reviewed on a separate basis, consolidated basis, or both		-	7	1
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				البرسا
b	Were the organization's financial statements audited by an independent accountant?	,	2b		<b>√</b>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both.	eo on a	1 ,		- 1
					[
_	Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	oreight	<del></del>	<del></del>	لئث
C	of the audit, review, or compilation of its financial statements and selection of an independent account	-	2c		
	If the organization changed either its oversight process or selection process during the tax year, ex		÷.		. 1,44
	Schedule O.	piani ni		, .;	``]
32	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in		<del></del>	لنب
Ja	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under	rao the	54		
_	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		3b		
	, , , , , , , , , , , , , , , , , , , ,		For	n 990	(2017)
			. 511		,,

#### SCHEDULE C (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Complete if the organization is described below.
 Attach to Form 990 or Form 990-EZ.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then • Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C • Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B Section 527 organizations Complete Part I-A only If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations Complete Part III Name of organization **Employer identification number** Canadian County Farm Bureau 73-0628951 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") 3 Volunteer hours for political campaign activities (see instructions) Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955. 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No No 4a Was a correction made? Yes b If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3). Part I-C Enter the amount directly expended by the filing organization for section 527 exempt function . . Enter the amount of the filing organization's funds contributed to other organizations for section 2 527 exempt function activities Total exempt function expenditures. Add lines 1 and 2 Enter here and on Form 1120-POL, 3 Did the filing organization file Form 1120-POL for this year? . 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV (a) Name (b) Address (c) FIN (d) Amount paid from (e) Amount of political contributions received and filing organization's funds If none, enter -0promptly and directly delivered to a separate political organization If none, enter -0-(1)(2)(3)(4)(5)(6)

_			•
Pa	Œθ	3	4

20.100		2 1 2 22 1		<del></del>			
Par	t II-A	Complete if the organizat section 501(h)).	ion is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ection under
A	Check -	If the filing organization bel	•	- ' '		ılıated group memb	per's name,
		address, EIN, expenses, ar			·		
<u>B</u> (	Check -	If the filing organization che			rovisions apply	<del>                                     </del>	
		(The term "expenditures"	bbying Expendit		1	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total	obbying expenditures to influen			-	g	<b>3 p</b>
b		obbying expenditures to influen					
0		obbying expenditures (add lines	<del>-</del>	ody (direct lobbyin	9/		
d		exempt purpose expenditures	•				
e		exempt purpose expenditures (a		ld) .			
f		ing nontaxable amount. Ente		•	a table in both		
_	columi				,		
	If the ar	nount on line 1e, column (a) or (b)	is: The lobbying	nontaxable amoun	t is:		
		r \$500,000		mount on line 1e			• •
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plus	s 15% of the excess	over \$500,000		•
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plus	s 10% of the excess	over \$1,000,000		, ,
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plus	s 5% of the excess o	ver \$1,500,000		
	<del></del>	7,000,000	\$1,000,000			1	•
g		oots nontaxable amount (enter	•				
h		ct line 1g from line 1a If zero o					
1		ct line 1f from line 1c If zero or	•				
J		e is an amount other than zeing section 4911 tax for this yea		1h or line 1i, dic	the organization	n file Form 4720	Yes No
	Тороны			Period Under sec	tion 501(h)	• • •	
	(Som	e organizations that made a				of the five colum	ns below.
	•			ructions for lines			
		Lobbyi	ng Expenditures	During 4-Year A	veraging Period	1	
	Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2014	<b>(b)</b> 2015	<b>(c)</b> 2016	<b>(d)</b> 2017	(e) Total
2a	Lobbyi	ng nontaxable amount					
b		ng ceiling amount of line 2a, column (e))		1			
c	Total lo	obbying expenditures					
d	Grassr	oots nontaxable amount					
е		oots ceiling amount of line 2d, column (e))					
f	Grassr	oots lobbying expenditures					

	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	(a)		(b)		
descr	ription of the lobbying activity.	Yes	No	,	Amoun	t	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.				ī	٠.	
а	Volunteers?			١.'			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			1	_		
С	Media advertisements?						
d	Mailings to members, legislators, or the public?						
е	Publications, or published or broadcast statements?						
f	Grants to other organizations for lobbying purposes?						
g	Direct contact with legislators, their staffs, government officials, or a legislative body?						
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .						
i	Other activities?						
j	Total. Add lines 1c through 1i						
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				7. 1		
b	If "Yes," enter the amount of any tax incurred under section 4912		1				
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .		<u> </u>				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?						
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6).	)(5), (	or se	ction	l		
					Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?			1	✓		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2	✓	1	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the	prior	year?	3		✓	
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."  Dues, assessments and similar amounts from members	R (b)	Part	i III-A	, line :	3, is	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts	: of	-				
_	political expenses for which the section 527(f) tax was paid).		٠.				
	Current year		2a	1			
а	Carryover from last year		2b				
a b							
	Total		2c				
b	Total		2c	<del></del>			
b c	Total						
b c	Total	the					
b c	Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?	the ying					
b c	Total	the ying	3				
b c 3 4	Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	the ying	3				
b c 3 4 5 Part	Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby and political expenditure next year?  Taxable amount of lobbying and political expenditures (see instructions)	the ying	3 4 5				
b c	Total						

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Canad	an County Farm Bureau		73-0628951
Pai	Organizations Maintaining Donor Ad	vised Funds or Other Similar Fu	nds or Accounts.
	Complete if the organization answered	"Yes" on Form 990, Part IV, line 6	•
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year) .		
4	Aggregate value at end of year		
5	Did the organization inform all donors and dono		
	funds are the organization's property, subject to the	he organization's exclusive legal contr	ol? 🗌 Yes 🗌 No
6	Did the organization inform all grantees, donors,		
	only for charitable purposes and not for the bene	efit of the donor or donor advisor, or t	for any other purpose
	conferring impermissible private benefit?	· · · · · · · · · · · · · · · · · · ·	· · · · · · · Yes . No
Par	Conservation Easements.		
	Complete if the organization answered		
1	Purpose(s) of conservation easements held by the	- · · · · · · · · · · · · · · · · · · ·	
	Preservation of land for public use (e.g., recrea	·	
	Protection of natural habitat	☐ Preservation of	of a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization h	neld a qualified conservation contributi	
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		. 2a
b	Total acreage restricted by conservation easemen		2b
C	Number of conservation easements on a certified		. 2c
ď	Number of conservation easements included in		
_	historic structure listed in the National Register		2d
3	Number of conservation easements modified, tran	nsferred, released, extinguished, or ter	minated by the organization during the
_	tax year ►		
4	Number of states where property subject to conse		
5	Does the organization have a written policy reviolations, and enforcement of the conservation ea		·
_	·		· · · · L Yes L No
6	Staff and volunteer hours devoted to monitoring, inspe	ecting, nandling of violations, and enforcing	ng conservation easements during the year
7	Amount of expanses included in monitoring increase.	no bondino of moletions and onforces	
7	Amount of expenses incurred in monitoring, inspecti ►\$	ng, nandling of violations, and enforcing	conservation easements during the year
8	Does each conservation easement reported on line	2(d) above eatisfy the requirements of	f saction 170/h)/4//P)(i)
Ü	and section 170(h)(4)(B)(ii)?	e z(d) above satisfy the requirements of	T Yes ☐ No
9	In Part XIII, describe how the organization reports		
9	balance sheet, and include, if applicable, the text		
	organization's accounting for conservation easem		mariolal statements that describes the
Pari	III Organizations Maintaining Collection		r Other Similar Assets.
	Complete if the organization answered		
1a	If the organization elected, as permitted under SF		
	works of art, historical treasures, or other similar		
	public service, provide, in Part XIII, the text of the		
b	If the organization elected, as permitted under S		
_	works of art, historical treasures, or other similar		
	public service, provide the following amounts relati	· · · · · · · · · · · · · · · · · · ·	,
	(i) Revenue included on Form 990, Part VIII, line 1	<del>-</del>	<b>&gt;</b> \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of an		
	following amounts required to be reported under S		
а	Revenue included on Form 990, Part VIII, line 1	· · · · · · · · ·	▶ \$
	Assets included in Form 990, Part X	- · · · · · · · · · · · · · · · · · · ·	<b>b</b> ¢

Page	e 2	

Pari	III Organizations Maintaining							
3	Using the organization's acquisition, collection items (check all that apply)		her reco	rds, chec	k any of th	ne follow	ving that are a	significant use of its
а	☐ Public exhibition		d	☐ Loan	or exchang	ge progr	rams	
b	☐ Scholarly research		е	☐ Other	r			
С	☐ Preservation for future generation	S						
4	Provide a description of the organiza XIII	ition's collections a	and expla	ain how t	hey further	the org	anızatıon's ex	empt purpose in Part
5	During the year, did the organization							
	assets to be sold to raise funds rathe		ained as i	oart of the	e organizat	ion's co	illection? .	· 🔲 Yes 🗌 No
Pari					<b>-</b>	_		
	Complete if the organization	n answered "Yes	" on For	m 990, I	art IV, lin	e 9, or	reported an a	amount on Form
-10	990, Part X, line 21.  Is the organization an agent, trustee	austadian ar ath	or intern	andian (fe	or contribu	tions or	other accets	not
Id	included on Form 990, Part X?							· Tyes No
b	If "Yes," explain the arrangement in F					•		
	in res, explain the arrangement in r	art Am and compre	sto the lo	mowning to	abic.		1	Amount
С	Beginning balance					1c		
d	Additions during the year					1d		<del></del>
e	Distributions during the year .					1e	-+	
f	Ending balance					1f		
2a	Did the organization include an amou	nt on Form 990, Pa	art X, line	21, for e	scrow or c	ustodial	account liabil	ity?    Yes    No
b	If "Yes," explain the arrangement in F	art XIII. Check here	e if the ex	xplanatio	n has been	provide	ed on Part XIII	
Par	V Endowment Funds.	• •						
	Complete if the organization		" on For	m 990, F				
		(a) Current year	(b) Pri	or year	(c) Two yea	rs back	(d) Three years ba	ack (e) Four years back
1a	Beginning of year balance							
b	Contributions							
С	Net investment earnings, gains, and losses							
ď	Grants or scholarships							
е	Other expenditures for facilities and programs							
f	Administrative expenses							
g	End of year balance							
2	Provide the estimated percentage of	the current year en	d balanc	e (line 1g	ı, column (a	a)) held a	as:	
а	Board designated or quasi-endowme	nt 🕨	_%					
b	Permanent endowment	<u></u> %						
¢	Temporarily restricted endowment	·%						
_	The percentages on lines 2a, 2b, and							
3a	Are there endowment funds not in th	e possession of th	ie organi	zation tha	at are held	and adr	ministered for	
	organization by.							Yes No
	(i) unrelated organizations							3a(i)
	(ii) related organizations							3a(ii)
b	If "Yes" on line 3a(ii), are the related of							. 3b
4 Post	Describe in Part XIII the intended use		on's enac	wment it	unas.			
Part	VI Land, Buildings, and Equip Complete if the organization		on For	m 000 E	Part IV June	0 110 9	Soo Form 00	0 Part V line 10
	Description of property	(a) Cost or ot			or other basis		Accumulated	(d) Book value
<del>-</del>		(investme			ther)		preciation	(u) Book value
1a	Land	•			42,118.62	4	• 1-•	42,118 62
b	Buildings	•			671,652.64		398,022 04	273,630 60
C	Leasehold improvements	-						
d	Equipment				98,642.72		98,517.07	125.65
e Total	Add lines 1a through 1e. (Column (d) r	nust acual Farra Co	20 De-1	/ 00/:	(D) lim = 41	20.1		<u> </u>
· Jiai.	riaa iirles ta ulitugii 16. (Cululilli (U) I	nusi <del>c</del> yudi FUIII 98	ou, rail /	i, colullill	( <i>D), III IE 1</i> (	$\mathcal{L}_{I}$ .		315,874 87

Part VII	Investments—Other Securities Complete if the organization as		m 990	), Part IV, line	e 11b. See Forn	n 990, Part X, line 12.
	(a) Description of security or cated (including name of security)		Υ .	) Book value	(c) Me	thod of valuation d-of-year market value
(1) Financial	derivatives					
	neld equity interests					
(3) Other			<u> </u>			
(A)						
(B)						
(C)					<u> </u>	
(D)			<u> </u>			
(E)						
(F)			ļ			
(G)			-			
(H)			<u> </u>			
	b) must equal Form 990, Part X, col (B) line 12)		<u> </u>			<del> </del>
Part VIII	Investments—Program Relat		··· 000	Dort IV line	a 11a Saa Fara	n 000 Bort V line 12
	Complete if the organization ai		T			
	(a) Description of investment		(6)	Book value		ethod of valuation d-of-year market value
(1)						
(2)		·····	ļ			
(3)			ļ			
(4)			<del>                                     </del>			
(5)			<u> </u>			
(6)		···-	<del>                                     </del>			
(7)			<del>                                     </del>			<del>-</del> -
(8)			<u> </u>			<del> </del>
(9)	b) must equal Form 990, Part X, col. (B) line 13.)					• • • • • • • • • • • • • • • • • • • •
Part IX	Other Assets.	<del></del>	<u> </u>			
Partix	Complete if the organization ar	newered "Ves" on For	m 001	Dart IV line	a 11d See Forn	n 990 Part Y line 15
	Complete if the organization at	(a) Description		5, 1 ait 14, iii k	5 1 Tu. Occ 1 0111	(b) Book value
(1)	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				
(2)			-			
(3)		<del>· · · · · · · · · · · · · · · · · · · </del>				
(4)						
(5)		·				-
(6)		<del></del>				
(7)		·	-			
(8)			-			
(9)					-	
Total. (Colui	mn (b) must equal Form 990, Part X,	col. (B) line 15 )			>	
Part X	Other Liabilities.					
	Complete if the organization ar	nswered "Yes" on For	m 990	), Part IV, line	e 11e or 11f. Se	e Form 990, Part X,
	line 25.					
1.	(a) Description of liability	(b) Book value				
(1) Federal in	come taxes			<b>x</b>		
(2)						
(3)						
(4)						
(5)						
(6)					•	
(7)						
(8)						
(9)						
	o) must equal Form 990, Part X, col (B) line 25) 1					
2. Liability for	uncertain tax positions. In Part XIII, pre	ovide the text of the footne	ote to t	he organization	's financial stateme	ents that reports the

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedu	le D (Form 990) 2018		Page 4
Pari		ents With Revenue ner	
ı aı	Complete if the organization answered "Yes" on Form 990, I	<del>-</del>	noturn.
1	Total revenue, gains, and other support per audited financial statements		1 -
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		52.0
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	<b>- </b>
d	Other (Describe in Part XIII )	2d ·	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		468
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line	12.)	5
Part			er Return.
	Complete if the organization answered "Yes" on Form 990, I	Part IV, line 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		574
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
С	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	· ·	N. W. C.
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
С	Add lines <b>4a</b> and <b>4b</b>		4c
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line	e 18.)	5
Part			
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and		
2, Par	t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part	to provide any additional in	iformation.
	•		•
	***************************************		
	·		
			•••••
			·

#### SCHEDULE O (Form 990 or 990-EZ)

# Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

2017

Employer identification number

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

OMB No 1545-0047

73-0628951 Canadian County Farm Bureau The organization does not have stockholders but it does have members. There are two types of members. One is an Associate member and the other is a Voting member. An Associate member includes someone who runs or operates a farm but whose gross agricultural income is less than half their total income. An Associate member also includes someone working in Agribusiness Someone who is not directly related to Agriculture is an Associate member Lastly, an Associate member can hold their membership through a church, FFA chapter, an association or by a corporation not producing agricultural products. A Voting member can be a family that gets the majority of its average gross income from the sale of agricultural products. A Voting member can also be held by a retired agricultural person living on an income or social security accrued and not employed full time in another occupation A Voting member can also be held by a partnership or corporation receiving the majority of income from the sale of agricultural products. Sept Monthly board meeting - 9 members 2.5 hours each Nov Monthly board meeting - 7 members 2.5 hours each Dec Monthly board meeting - 9 members 2 5 hours each Monthly board meeting - 8 members 2 5 hours each Jan, Feb & Aug March & May Monthly board meeting - 7 members 2 5 hours each Monthly board meeting - 6 members 2.5 hours each April & July March County Stock Show - 5 members 10 hours each March Leadership Conference - 2 members 8 hours each October Annual meeting - 9 members 3 hours each State Level State Convention - 3 members 15 hours

August Area meeting - 6 members 4 hours